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| Fill in this information to identify your case: | | |
|---|-------------------------------|------------------|
| United States Bankruptcy Court for the: | | |
| Northern District of: Illinois (State) | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 Chapter 11 | |
| | ☐ Chapter 12 ☐ Chapter 13 | Check if amended |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Pablo | |
| Write the name that is on | First name | First name |
| your government-issued picture identification (for | Middle name | Middle name |
| example, your driver's | Martinez | |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the | First name | First name |
| last 8 years | Middle name | Middle name |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 | XXX - XX- <u>7660</u> | xxx - xx- |
| digits of your Social Security number or federal | OR | OR |
| Individual Taxpayer | 9 xx - xx- | 9 xx - xx- |
| Identification number (ITIN) | | |

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| Debtor 1 Pablo First Name | Martinez Middle Name Last Name | Case number (if known) |
|--|--|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the | Business name | Business name |
| last 8 years | Business name | Business name |
| Include trade names and doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 3218 W 62nd St | If Debtor 2 lives at a different address: |
| | Number Street | Number Street |
| | Chicago Illinois 60629 City State Zip Code | City State Zip Code |
| | Cook | |
| | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district to file for bankruptcy | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |

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| Debtor 1 Pablo First Name | Middle Name | Martinez Last Name | | Case number (if know | vn) | |
|---|--|--|--|---|--|--|
| Part 2: Tell the Court Abo | out Your Bankruptcy C | ase | | | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief descr B2010)). Also, go to the top of Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | • | • | (b) for Individual: | s Filing for Bankruptcy (Form |
| 8. How you will pay the fee | may pay with cash, on your behalf, your I need to pay the fe Individuals to Pay You I request that my fe By law, a judge may less than 150% of the fee in installment. | Is about how you may cashier's check, or mattorney may pay wite in installments. If our Filing Fee in Install the be waived (You may, but is not required to | y pay. Toney on ha cre you chements (ay requents, waive that ags option | rypically, if you and arder If your a dit card or checoose this option (Official Form 10 est this option of a your fee, and oplies to your fan, you must fill of the results. | are paying the ttorney is suble ttorney is suble to make the total and at the total are the total are the the the the the the the the the th | ne fee yourself, you omitting your payment or printed address. tach the <i>Application for</i> e filing for Chapter 7. nly if your income is a you are unable to pay |
| 9. Have you filed for bankruptcy within the last 8 years? | | ern District of Illinois ern District of Illinois | When When When | 11/20/2014 MM / DD / YYYY 8/12/2010 MM / DD / YYYY | Case number _ Case number _ Case number _ | 14-41936 10-36102 |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | | When When | MM / DD / YYYY MM / DD / YYYY | Relationship to Case number, if Relationship to Case number, if | known |
| 11. Do you rent your residence? | ✓ No. Go to lin Yes. Fill out <i>l</i> . | obtained an eviction judgmer e 12. nitial Statement About an Ev cruptcy petition. | | | | |

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| Debtor 1 Pablo First Name | | Midd | | Martinez Last Name | Case number (if know | m) | |
|--|---|--------------------|--|---|-----------------------------|--------------------|----|
| | v Bus | | | | | | |
| Part 3: Report About An 12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a | y Bus | No. | Go to Part 4. Name and location of both Name of business, if an Number City Check the appropriate | Sole Proprietor business Street Street | | Zip Code | |
| separate sheet and attach it to this petition. | Single Ass Stockbroke Commodit | | Single Asset Re Stockbroker (as | e Business (as defined in 11 U.S.C. § 101(27A)) et Real Estate (as defined in 11 U.S.C. § 101(51B)) er (as defined in 11 U.S.C. § 101(53A)) er Broker (as defined in 11 U.S.C. § 101(6)) er above | | | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | Chapter 11 of the Bankruptcy Code and are you a small Against Statement, and federal income tax return or if any of these documents do not exist, follow the process U.S.C. § 11 16(1)(B). | | | | | tement of | |
| For a definition of small business debtor, see 11 U.S.C. § 101(51D). | | No. No. Yes. | Bankruptcy Code. | er 11, but I am NOT | a small business debtor acc | | |
| Part 4: Report if You Ow | n or | Have A | Any Hazardous Pro | operty or Any P | roperty That Needs I | mmediate Attention | |
| 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard | | | What is the hazard? If immediate attention is r | needed, why is it need | ded? | | |
| to public health or safety? Or do you own any property that needs immediate attention? | | , | Where is the property? | Number | Street | | |
| For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | City | State | Zip Co | de |

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Debtor 1 Pablo Martinez Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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| Debtor 1 Pablo | | Martinez Case number (if ki | nown) | | | | |
|---|---|--|--|--|--|--|--|
| Part 6: Answer These Qu | Middle Name uestions for Reporting Purpo | Last Name | | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be availa No. Yes. | | ty is excluded and administrative expenses are | | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| Part 7: Sign Below | | | | | | | |
| For you | and correct. If I have chosen to file under of 11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me ame fill out this document, I had I request relief in accordance I understand making a false so | Chapter 7, I am aware that I may property. I States Code. I understand the relief pter 7. and I did not pay or agree to pay so we obtained and read the notice required with the chapter of title 11, United Statement, concealing property, or obtained case can result in fines up to \$250,0152, 1341, 1519, and 3571. Signature Execute | f available under each chapter, and I meone who is not an attorney to help uired by 11 U.S.C. § 342(b). States Code, specified in this petition. otalining money or property by fraud in 000, or imprisonment for up to 20 | | | | |

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| Debtor 1 Pablo | | Martinez | Case number (if I | known) | | |
|---|---|---|-------------------|--------------------------|--|--|
| First Name | Middle Name | Last Name | | | | |
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not | eligibility to proceed un the relief available und to the debtor(s) the not certify that I have no k petition is incorrect. | at I have informed the debtor(s) about ited States Code, and have explained igible. I also certify that I have delivered a case in which § 707(b)(4)(D) applies, tion in the schedules filed with the | | | | |
| need to file this page. | /s/ Mark Bernachea | ì | Date | 10/19/2016 | | |
| . 0 | Signature of Attorney | | | MM / DD / YYYY | | |
| | Mark Bernachea Printed name Semrad Law Firm Firm name 11101 S. Western Aver | nue | | | | |
| | Chicago | | Illinois | 60643 | | |
| | City | | State | Zip Code | | |
| | Contact phone | 3128374026 | Email address | mbernachea@semradlaw.com | | |
| | 6317545 | | Illinois | 6 | | |
| | Bar number | | State | | | |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|
| Debtor 1 | Pablo | | Martinez | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing | ng) First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| (State) | | | | | | |
| Case number (If known) | - | | | | | |

| П | Check if this is ar |
|---|---------------------|
| | amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$8,100.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$8,100.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$6,650.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$7,928.31 |
| Your total liabilities | \$14,578.31 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$4,405.44 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$3,905.00 |
| | |

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| De | btor 1 | Pablo | | Martinez | Case n | umber (if known) | | | | |
|-------------|--|---|---------------------------|-------------------------------|--------------------|---------------------------|------------|--|--|--|
| | | First Name | Middle Name | Last Name | | | | | | |
| Par | t 4: | Answer These Questio | ns for Administrat | ive and Statistical R | ecords | | | | | |
| 6. | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | | |
| | ✓ Yes. | | | | | | | | | |
| 7. \ | What I | kind of debt do you have? | | | | | | | | |
| | _ | our debts are primarily consumily, or household purpose. 11 | | | , | | | | | |
| | | our debts are not primarily ais form to the court with your court | | ave nothing to report on this | s part of the form | . Check this box and subm | nit | | | |
| 8. | | the Statement of Your Cu 122A-1 Line 11; OR, Form 12 | • | 1,7,7 | nthly income fro | m Official | \$4,478.60 | | | |
| 9. | Cop | by the following special cate | gories of claims from | Part 4, line 6 of Schedule | E/F: | | | | | |
| | Froi | m Part 4 on Schedule E/F, c | opy the following: | | | Total claim | | | | |
| | 9a. l | Domestic support obligations | (Copy line 6a.) | | | \$0.00 | | | | |
| | 9b. ⁻ | Taxes and certain other debts y | ou owe the government. | (Copy line 6b.) | | \$0.00 | | | | |
| | 9c. (| Claims for death or personal in | jury while you were intox | icated. (Copy line 6c.) | | \$0.00 | | | | |
| | 9d. \$ | Student loans. (Copy line 6f.) | | | | \$0.00 | | | | |
| | | Obligations arising out of a ser | paration agreement or div | vorce that you did not repor | t as | \$0.00 | | | | |
| | 9f. C | Debts to pension or profit-shar | ng plans, and other simi | ar debts. (Copy line 6h.) | | \$0.00 | | | | |
| | 9g. ' | Total. Add lines 9a through 9f | | | | \$0.00 | | | | |

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| Fill in this | information to identify your ca | ase: | | | | |
|--|---|--|---|---|---|--|
| Debtor 1 | Pablo | | | Martinez | | |
| | First Name | Middle N | lame | Last Name | | |
| Debtor 2 (Spouse, | if filing) First Name | Middle N | lame | Last Name | | |
| United St | ates Bankruptcy Court for the | Northern | | District of Illinois (State) | | |
| Case nur (If known) | | | | | | |
| Officia | al Form 106A/B | | | | | Check if this is an amended filing |
| Sche | dule A/B: Prop | erty | | | | 12 <i>/</i> - |
| category responsik write your Part 1: | where you think it fits best. ble for supplying correct into name and case number (if Describe Each Reside | Be as complete and formation. If more s known). Answer ev ence, Building, | d accura pace is ery que Land, | et only once. If an asset fits in more that as possible. If two married people a needed, attach a separate sheet to this stion. Or Other Real Estate You Own sidence, building, land, or similar properties. | re filing together, both are s form. On the top of any a or Have an Interest In | equally |
| ✓ | No. Go to Part 2 | | | | | |
| | Yes. Where is the property? | | | | | <u>-</u> |
| 1.1 | | | | is the property? Check all that apply. Ingle-family home | the amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> |
| | Street address, if available, | or other description | _ | plex or multi-unit building | | aims Secured by Property. |
| | | _ | | andominium or cooperative | Current value of the entire property? | Current value of the portion you own? |
| | | | Lai | anufactured or mobile home nd | | |
| | Number Street | | Inv | restment property | Describe the nature of interest (such as fee si | |
| | City State | Zip Code | | neshare ner | the entireties, or a life | estate), if known. |
| | | | one. De | has an interest in the property? Check botor 1 only botor 2 only botor 1 and Debtor 2 only least one of the debtors and another | Check if this is co (see instructions) | mmunity property |
| | | | Other | information you wish to add about this | s item, such as local | |
| If you | own or have more than one, lis | st here: | | | | |
| 1.2 | | | | is the property? Check all that apply. ngle-family home | the amount of any secure | laims or exemptions. Put ed claims on Schedule D: |
| | Street address, if available, | or other description | Du | plex or multi-unit building | | ims Secured by Property. Current value of the |
| | | | | ndominium or cooperative anufactured or mobile home | Current value of the entire property? | portion you own? |
| | | | Lai | | | |
| | Number Street | | | restment property | Describe the nature of interest (such as fee si | |
| | City State | Zip Code | | neshare ner | the entireties, or a life | |
| | | · | one. De | has an interest in the property? Check btor 1 only btor 2 only btor 1 and Debtor 2 only | Check if this is co (see instructions) | mmunity property |
| | | | Δt | least one of the debtors and another | | |

Other information you wish to add about this item, such as local property identification number:

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| Debtor 1 | Pablo First Name | Middle Name | Martinez Ca | ise number | (if known) | |
|----------|---|---|--|------------|---|--|
| 1.3Sti | reet address, if available, or ot | [| What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | | Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property? | |
| Nu Ci | mber Street y State | Zip Code | Land Investment property Timeshare Other | | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | |]]] | Who has an interest in the property? Ched Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about | | Check if this is con (see instructions) such as local | mmunity property |
| | | tion you own for a | oroperty identification number: all of your entries from Part 1, including a re. | | | |
| you own | | equitable interest i u lease a vehicle, als | in any vehicles, whether they are registere so report it on Schedule G: Executory Contrac ycles | | | |
| | Make Model: Year: | Chevrolet Impala 2007 | Who has an interest in the property? one. Debtor 1 only | Check | | laims or exemptions. Put ed claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: used | 130000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this is community proper instructions) | | Current value of the entire property? \$6650.00 | Current value of the portion you own? \$6650.00 |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the property? one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | er | • | laims or exemptions. Put ad claims on Schedule D: hims Secured by Property. Current value of the portion you own? |
| | | | Check if this is community proper instructions) | rty (see | | |

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| Debtor 1 | Pablo | Martinez | Case number (if known) | |
|----------|------------------------------------|---|--|--|
| | First Name M | iddle Name Last Name | | |
| 3.3 | Make | Who has an interest in the pro | | ed claims or exemptions. Put |
| | Model: | one. | • | ecured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors vvno Have | e Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of t | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and | | |
| | | Check if this is community instructions) | property (see | |
| 3.4 | Make | Who has an interest in the pro | | ed claims or exemptions. Put |
| | Model: | one. | • | ecured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors who Have | e Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of t | he Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and | another | |
| | | Check if this is community instructions) | property (see | |
| └ | Yes Make | Who has an interest in the pro | perty? Check Do not deduct secur | ed claims or exemptions. Put |
| 4.1 | Make Model: | who has an interest in the pro | | ed claims or exemptions. Put ecured claims on <i>Schedule D:</i> |
| | Year: | Debtor 1 only | | e Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | 0 | |
| | Other information: | Debtor 1 and Debtor 2 only | Current value of t entire property? | he Current value of the portion you own? |
| | Calor information. | At least one of the debtors and | | |
| | | Check if this is community | | |
| | | instructions) | hioheith (see | |
| 4.2 | Make | Who has an interest in the pro | perty? Check Do not deduct secur | ed claims or exemptions. Put |
| | Model: | one. | - | ecured claims on Schedule D: |
| | Year: | Debtor 1 only | Creditors Who Have | e Claims Secured by Property. |
| | Approximate mileage: | Debtor 2 only | Current value of t | he Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and | another | |
| | | Check if this is community instructions) | property (see | |
| | | ou own for all of your entries from Part 2, inclu | | \$6650.00 |
| vou ha | ve attached for Part 2. Write that | number here | > | * |

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| D | ebtor 1 | | Martinez | Case number (if known) | |
|----------|-----------------------|--------------------------------|---|----------------------------|---|
| Б | ant Or | First Name | Middle Name Last Name | | |
| | | | our Personal and Household Items ave any legal or equitable interest in any of the follo | wing items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | | s and furnishings Jiances, furniture, linens, china, kitchenware | | |
| <u>✓</u> | Yes. D | escribe | miscellaneous household goods and furnishings: chairs, bedroom set, | couch, tables | \$500.00 |
| | | | s and radios; audio, video, stereo, and digital equipment; computers, pri | nters, scanners; music | |
| | Yes. D | escribe | | | |
| | Examp No | stamp, co | lue and figurines; paintings, prints, or other artwork; books, pictures, or othe pin, or baseball card collections; other collections, memorabilia, collectib | • | |
| L | Yes. D | escribe | | | |
| | | les: Sports, ph | orts and hobbies notographic, exercise, and other hobby equipment; bicycles, pool tables, ks; carpentry tools; musical instruments | golf clubs, skis; canoes | |
| ✓ | No | | | | |
| | Yes. D | escribe | | | |
| | No | | les, shotguns, ammunition, and related equipment | |] |
| | i | | clothes, furs, leather coats, designer wear, shoes, accessories | | |
| 닏 | No | | | | 7 |
| ⊻ | Yes. L | escribe | used clothing and apparel: jeans, shorts, shoes, shirts, sweaters, button | n up shirts | \$450.00 |
| | | • | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jev er | velry, watches, gems, | |
| Ė | | escribe | | | <u> </u> |
| | Examp No | -farm animal les: Dogs, cat | is s, birds, horses | |] |
| Н | 1 .00. 2 | -5555 | | | |
| | 1 4. Any No | other persor | nal and household items you did not already list, including any hea | alth aids you did not list | |
| | | escribe | | |] |
| ٦ | • | | | | |
| | | | llue of all of your entries from Part 3, including any entries for pag number here | | \$950.00 |

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| Den | First Name | Middle Name | Ividi til lez | Case number (ii known) | |
|------|---|---|--------------------------------|---|--|
| Dort | First Name | Financial Assets | Last Name | | |
| Part | | any legal or equitable int | erest in any of the follow | ving? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ✓ No | e in your wallet, in your home, in a | | en you file your petition Cash: | |
| 17. | Examples: Checking, sa | avings, or other financial accounts stitutions. If you have multiple acc | | credit unions, brokerage houses, | |
| | | 17.1. Checking account: | Citbank | | \$500.00 |
| | | 17.2. Checking account:17.3. Savings account: | | | \$0.00 |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | - | | |
| | | 17.9. Other financial account: | | | |
| 18. | Examples: Bond funds, No | , or publicly traded stocks investment accounts with brokerag | e firms, money market accounts | | |
| | Yes | | | | |
| 19. | an LLC, partnership, | | ated and unincorporated busir | esses, including an interest in % of ownership: | |
| | Yes. Give specific information about them | Tearrie of oracty | | 70 OI OWNOISHIP. | |
| | | _ | | | |
| | | | | | |

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| Debt | or 1 | Pablo | | Martinez | Case number (if known) | |
|------|------------|--|--|---|---|--|
| | | First Name | Middle Name | Last Name | | |
| 20. | Neg Non | otiable instruments ir | orate bonds and other negotion clude personal checks, cashiers nts are those you cannot transfer | checks, promissory notes, | and money orders. | |
| | | Yes. Give specific information about them | Issuer name: | | | |
| | | | | | | |
| 21. | Exa | | |), thrift savings accounts, o | r other pension or profit-sharing plans | |
| | | No | Type of account: | Institution name: | | |
| | Ц | Yes. List each account separately. | 401(k) or similar plan: | | | |
| | | soparatory. | Pension plan: | | | |
| | | | IRA: | | | |
| | | | Retirement account: | | | |
| | | | Keogh: | | | |
| | | | Additional account: | | | |
| | | | Additional account: | | | |
| 22. | You Exa | urity deposits and property share of all unused of all unused of apples: Agreements with panies, or others No | orepayments deposits you have made so that yo with landlords, prepaid rent, publi | ou may continue service or uc utilities (electric, gas, wat | use from a company er), telecommunications | |
| | Ħ | Yes | Electric: | | | |
| | | | Gas: | | | |
| | | | Heating oil: | | | |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | |
| | | | Telephone: | | | |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | | | a periodic payment of money to | you, either for life or for a nu | imber of years) | |
| | | No Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |

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| Debt | or 1 Pablo First Name | Middle | | rtinez Case numl | ber (if known) | |
|------|---|---|------------------------------|---|--|--|
| 24. | Interests in a | n education IRA, in an acc | count in a qualified ABI | LE program, or under a qualified | state tuition program | |
| | 26 U.S.C. §§ 5 | 30(b)(1), 529A(b), and 529(| D)(1). | | | |
| | Yes | Institution name and descrip | tion. Separately file the re | ecords of any interests.11 U.S.C. § 5 | 521(c): | |
| | | | | | | |
| | | | | | | |
| 25. | | | property (other than an | ything listed in line 1), and rights | s or powers | |
| | No No | or your benefit | | | | |
| | Yes. Desc | ribe | | | | |
| | | | | | | |
| 26. | | rights, trademarks, trade a rnet domain names, website | | | | |
| | ✓ No | | | | | |
| | Yes. Desc | ribe | | | | |
| 27. | Licenses fran | nchises, and other genera | l intangibles | | | |
| | | | | ation holdings, liquor licenses, profe | ssional licenses | |
| | ✓ No Yes. Desc | riha | | | | |
| | ies. Desc | HIDE | | | | |
| | | | | | | |
| Mor | ney or prope | erty owed to you? | | | | Current value of the portion you own? Do not deduct secured daims or exemptions |
| | ney or prope | | | | | portion you own? |
| | Tax refunds ov | wed to you | | | Fodoral | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds ov ✓ No ☐ Yes. Give s about | wed to you specific information them, including whether | | | Federal: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| | Tax refunds ov No Yes. Give s about you a | wed to you specific information | | | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th | specific information t them, including whether lready filed the returns ne tax years | | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | specific information t them, including whether lready filed the returns ne tax years | pousal support, child supp | ort, maintenance, divorce settlemen | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | specific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, sp | pousal support, child supp | ort, maintenance, divorce settlemen | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | specific information t them, including whether lready filed the returns ne tax years | oousal support, child supp | ort, maintenance, divorce settlemen | State: Local: t, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | specific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, sp | oousal support, child supp | ort, maintenance, divorce settlemen | State: Local: t, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | specific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, sp | oousal support, child supp | ort, maintenance, divorce settlemen | State: Local: t, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past | specific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, sp | oousal support, child supp | ort, maintenance, divorce settlemen | State: Local: t, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds on No Yes. Give s about you a and th Family suppor Examples: Past No Yes. Give s Other amounts | wed to you specific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, specific information | | | State: Local: t, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds on ✓ No ☐ Yes. Give s about you a and th Family suppor Examples: Past ✓ No ☐ Yes. Give s Other amounts Examples: Unpa | wed to you specific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, specific information | be payments, disability be | nefits, sick pay, vacation pay, workers | State: Local: t, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds on ✓ No Yes. Give s about you a and th Family suppor Examples: Past ✓ No Yes. Give s Other amounts Examples: Unpa | specific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, specific information | be payments, disability be | nefits, sick pay, vacation pay, workers | State: Local: t, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds on ✓ No ☐ Yes. Give s about you a and th Family suppor Examples: Past ✓ No ☐ Yes. Give s Other amounts Examples: Unpa | specific information them, including whether lready filed the returns ne tax years t due or lump sum alimony, specific information | be payments, disability be | nefits, sick pay, vacation pay, workers | State: Local: t, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Pablo | Martinez | Case number (if known) | |
|------|---|---|--|--|
| | First Name Middle Name | e Last Name | | _ |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; he | ealth savings account (HSA); credit, ho | meowner's, or renter's insurance | |
| | ✓ No Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died. | | or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | |
| 33. | Claims against third parties, whether or not Examples: Accidents, employment disputes, inst | | demand for payment | |
| | ✓ No Yes. Describe | | | |
| 34. | Other contingent and unliquidated claims of to set off claims | of every nature, including counterc | aims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not already list | | | |
| | ✓ No Yes. Describe | | | |
| 36. | Add the dollar value of all of your entries fro | | | \$500.00 |
| | | | | |
| Part | 5: Describe Any Business-Related | Property You Own or Have a | n Interest In. List any real estate | in Part 1. |
| 37. | Do you own or have any legal or equitable in | nterest in any business-related prop | erty? | |
| | ✓ No. Go to Part 6. Yes. Go to line 38. | | pr D | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions you alm | eady earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, softwar | | ines, rugs, telephones, desks, chairs, electro | nic devices |
| | ✓ No Yes. Describe | | | |
| | | | | |

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| Deb | tor 1 Pablo | Martinez Case number (if known) | |
|-------|-----------------------------------|--|------------------------------|
| 40. | First Name Machinery fixtures ec | Middle Name Last Name quipment, supplies you use in business, and tools of your trade | |
| 40. | | pulpinoni, supplies you use ili busiliess, anu toois di your traue | |
| | ✓ No Yes. Describe | | |
| | Les. Describe | | |
| | | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| | - | | |
| 42. | Interests in partnersh | ips or joint ventures | |
| | ✓ No | | |
| | Yes. Give specific | Name of entity: % of ownership: | |
| | information about | | |
| | them | | |
| | | | |
| 43. (| Customer lists. mailing | lists, or other compilations | |
| | No | | |
| | _ | clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | | isiaas personally lastialiasis information (as asimos in 11 5.5.5.3 101(1177)). | |
| | ☐ No | | |
| | Yes. Desc | ribe | |
| 44. | Any business-related | property you did not already list | |
| | ✓ No | | |
| | Yes. Give specific | | - |
| | information | | · · |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | _ |
| | | | |
| | | Ill of your entries from Part 5, including any entries for pages you have attached r here | |
| | | | |
| Part | | Farm- and Commercial Fishing-Related Property You Own or Have an Interest Ir n interest in farmland, list it in Part 1. | l . |
| 46. | Do you own or have a | any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | ✓ No. Go to Part 7. | | Current value of the |
| | Yes. Go to line 47. | | portion you own? |
| | 103. 00 10 11110 47. | | Do not deduct secured claims |
| | | | or exemptions |
| 47. | Farm animals | ultry form raised fish | |
| | Examples: Livestock, po | uiuy, iairri-iaiseu iisir | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |

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| Debt | or 1 | Pablo | Middle Nesse | Martinez | Case number (if known) | |
|---|--|--|---|---------------------------|------------------------------|-------------|
| 10 | Cro | First Name ps-either growing of | Middle Name | Last Name | | |
| 48. | _ | | n narvesteu | | | |
| | 넴 | No Vaa Dagariba | | | | |
| | ш | Yes. Describe | | | | |
| | - | - | | | · | |
| 49. | Far | m and fishing equip | ment, implements, machinery, fix | tures, and tools of trade | • | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | _ | | | | | |
| 50. | Far | m and fishing suppl | ies, chemicals, and feed | | | |
| | V | No | | | | |
| | Ħ | Yes. Describe | | | | |
| | | | | | | |
| 51. | Δnv | , farm- and commer | cial fishing-related property you d | id not already list | | |
| 01. | _ | | olal norming related property you d | ia not an eady not | | |
| | 넴 | No Yes. Describe | | | | |
| | ш | res. Describe | | | | |
| | - | | | | | |
| 52. A | dd th | ne dollar value of all | of your entries from Part 6, include | ding any entries for page | es you have attached | |
| for Pa | art 6. | Write that number I | nere | | > | |
| | | | | | | |
| | | | | | | |
| Part | 7: | | perty You Own or Have an | Interest in That You | Did Not List Above | |
| | | | | | | |
| 53. | | | erty of any kind you did not alread | dy list? | | |
| 53. | Exa | mples: Season tickets | erty of any kind you did not alread , country club membership | dy list? | | _ |
| 53. | Exa | mples: Season tickets | | dy list? | |] |
| 53. | Exa | mples: Season tickets | | dy list? | | |
| 53. | Exa | mples: Season tickets No Yes. Give specific | | dy list? | | |
| 53. | Exa | mples: Season tickets No Yes. Give specific | | dy list? | | |
| | Exal | mples: Season tickets No Yes. Give specific information | | | > | |
| | Exal | mples: Season tickets No Yes. Give specific information | , country club membership | | > | |
| | Exal | mples: Season tickets No Yes. Give specific information | , country club membership | | > | |
| | Exal | mples: Season tickets, No Yes. Give specific information ne dollar value of all | , country club membership | | > | |
| 54. Ad | Exal | mples: Season tickets, No Yes. Give specific information ne dollar value of all List the Totals of | of your entries from Part 7. Write | that number here | ▶ | |
| 54. Ad | Exal | mples: Season tickets, No Yes. Give specific information ne dollar value of all List the Totals of | of your entries from Part 7. Write | that number here | > | |
| Part 55. F | Exal | mples: Season tickets, No Yes. Give specific information ne dollar value of all List the Totals of the control of the contro | of your entries from Part 7. Write of Each Part of this Form | that number here | > | |
| Part 55. F | Example Exampl | mples: Season tickets, No Yes. Give specific information The dollar value of all List the Totals of the control of the contr | of your entries from Part 7. Write of Each Part of this Form ine 2 | that number here | > | |
| Part 55. F 56. p 57.Pc | Example 2 Exampl | mples: Season tickets, No Yes. Give specific information ne dollar value of all List the Totals of the control of the contro | of your entries from Part 7. Write of Each Part of this Form ine 2 | that number here | > | |
| Part 55. F 56. p 57.Pc | Example 2 Exampl | mples: Season tickets, No Yes. Give specific information The dollar value of all List the Totals of the control of the contr | of your entries from Part 7. Write of Each Part of this Form ine 2 | that number here | ▶ | |
| Part 55. P 57.P 58.P 58.P 6 | Example 2 Exampl | mples: Season tickets, No Yes. Give specific information The dollar value of all List the Totals of the control of the contro | of your entries from Part 7. Write of Each Part of this Form ine 2 | \$6650.00 \$950.00 | > | |
| Part 55. F 56. p 57.P 58.P 59. F | Example 2 And 1 And 2 And 2 And 3 And 4 And 5 An | mples: Season tickets, No Yes. Give specific information The dollar value of all List the Totals of the control of the contr | of your entries from Part 7. Write of Each Part of this Form ine 2 | \$6650.00 \$950.00 | ▶ | |
| Part 55. P 57.P 58.P 59. P 60. P | Example 1 | mples: Season tickets, No Yes. Give specific information The dollar value of all List the Totals of the total real estate, line It total vehicles, line It total personal and It Total financial associated to the total business-reless. Total farm- and fish | of your entries from Part 7. Write of Each Part of this Form ine 2 | \$6650.00 \$950.00 | > | |
| Part 55. P 56. p 57.P 58.P 59. P 60. P 61. F | Example 2 Art 1 2 Art | mples: Season tickets, No Yes. Give specific information The dollar value of all List the Totals of the control of the contro | of your entries from Part 7. Write of Each Part of this Form ine 2 I household items, line 15 ets, line 36 lated property, line 45 shing-related property, line 52 rty not listed, line 54 | \$6650.00 \$950.00 | | |
| Part 55. P 56. p 57.P 58.P 59. P 60. P 61. F | Example 2 Art 1 2 Art | mples: Season tickets, No Yes. Give specific information The dollar value of all List the Totals of the control of the contro | of your entries from Part 7. Write of Each Part of this Form ine 2 | \$6650.00 \$950.00 | Copy personal property total | +\$8100.00 |
| Part 55. P 56. p 57.P 58.P 59. P 60. P 61. F | Example 2 Art 1 2 Art | mples: Season tickets, No Yes. Give specific information The dollar value of all List the Totals of the control of the contro | of your entries from Part 7. Write of Each Part of this Form ine 2 I household items, line 15 ets, line 36 lated property, line 45 shing-related property, line 52 rty not listed, line 54 | \$6650.00 \$950.00 | > | + \$8100.00 |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|-----------------------------|-------------|--|--|
| Debtor 1 | Pablo | | Martinez | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing | ^(g) First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois(State) | | | |
| Case number (If known) | | | (State) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | t 1: Identify the Property You Cla | im as Exempt | | |
|-----|--|---|---|---|
| 1. | Which set of exemptions are you claimi | ng? Check one only, e | ven if your spouse is filing with you. | |
| | ✓ You are claiming state and federal nonb | ankruptcy exemptions. | 11 U.S.C. § 522(b)(3) | |
| | You are claiming federal exemptions. 1 | 1 U.S.C. § 522(b)(2) | | |
| 2. | For any property you list on Schedule A | /B that you claim as e | exempt, fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| | Brief description: Chevrolet Impala, 2007, used Line from | \$6,650.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |
| | Schedule A/B: 03 | | | |
| | Brief description: Citbank Line from Schedule A/B: 17 | \$500.00 | \$500.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes | 3 years after that for ca | | |

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| otor 1 Pablo | | Martinez Case number (if known |) <u> </u> |
|---|---|---|------------------------------------|
| First Name Middle 12: Additional Page | e Name | Last Name | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| Brief description: miscellaneous household goods and furnishings: chairs, bedroom set, couch, tables Line from | \$500.00 | \$500.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Schedule A/B:06 Brief description: used clothing and apparel: jeans, shorts, shoes, shirts, sweaters, button up shirts Line from Schedule A/B: 11 | \$450.00 | \$450.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) |
| Brief description: Citibank Line from Schedule A/B: 17 | \$0.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |

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| | | | · · | | | |
|------------------------|---|---|--|--|--|----------------------------------|
| Fill in this | s information to identify your case | c c | | | | |
| Debtor 1 | Pablo | | Martinez | | | |
| 20010. | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, | if filing) First Name | Middle Name | Last Name | | | |
| United S | tates Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case nui (If known) | | | | | | |
| Offic | ial Form 106D | | | Į. | | Check if this is a mended filing |
| Sche | edule D: Credit | ors Who Ha | ve Claims Secur | ed by Pro | perty | 12/1 |
| and case | number (if known). any creditors have claims secu | red by your property? | e entries, and attach it to this forn ur other schedules. You have nothing | , , | | s your name |
| 2. Li s | st all secured claims. If a credito | r has more than one secui | ed claim, list the creditor separately | Column A | Column B | Column C |
| | r each claim. If more than one cre uch as possible, list the claims in | • | , list the other creditors in Part 2. As ng to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| | ortfolio Recovery editor's Name | Describe the property | that secures the claim: | \$6,650.00 | \$6,650.00 | \$0.00 |
| Cc Cit W | Poncord California 94524 by State ZIP Code ho owes the debt? Check one. | ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check a ☑ An agreement you r car loan) | nade (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset) | | | |
| | Add the dollar value of | vour entries in Column | A on this page. Write that | \$6.650.00 | | |

number here:

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| Fill | in this inform | ation to identify your cas | e: | | | | | |
|----------------------|--|--|--|---|--|---|---|--|
| De | btor 1 | Pablo | | Martinez | | | | |
| | | First Name | Middle Name | Last Name | _ | | | |
| | btor 2 ouse, if filing | Firet Name | Middle Name | Last Name | _ | | | |
| (0) | ouco, ii iiiiig | i iist ivaille | Middle Name | Lastiname | | | | |
| Un | ited States Ba | ankruptcy Court for the: | Northern | District of Illinois | _ | | | |
| Ca | se number | | | (State) | | | | |
| (If k | nown) | | | | | | | |
| Of | ficial Fo | orm 106E/F | | | | Ch | neck if this is ar | n amended filing |
| 9 | shodu | In E/E: Cro | ditors Who | Have Unsecu | rad Claims | | | |
| <u> </u> | JIICUU | ile L/I . Cit | GUILOIS VVIIO | Have OHSecu | leu Ciaiilis | | | 12/15 |
| part 106/ that | y to any exe VB) and on are listed in ies in the bo | cutory contracts or un Schedule G: Executor Schedule D: Creditor | expired leases that could y Contracts and Unexpire s Who Hold Claims Secu | rs with PRIORITY claims and result in a claim. Also list exer d Leases (Official Form 106G) red by Property. If more space this page. On the top of any | cutory contracts on <i>Sch</i> . Do not include any cre e is needed, copy the Pa | nedule A/B editors with art you nee | t: Property (O h partially sec ed, fill it out, r | fficial Form cured claims number the |
| Par | t1: List A | All of Your PRIORI | TY Unsecured Claims | 3 | | | | |
| 1. | Do any cre | editors have priority ur | nsecured claims against ye | ou? | | | | |
| | ✓ No. G | o to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, ident much as po Continuation | ify what type of claim it is ossible, list the claims in on Page of Part 1. If mor | s. If a claim has both priority a alphabetical order according e than one creditor holds a p | ore than one priority unsecured and nonpriority amounts, list that to the creditor's name. If you ha particular claim, list the other crear this form in the instruction book | claim here and show both we more than two priority ditors in Part 3. | n priority an | d nonpriority a | mounts. As |
| | | | | | | Total | Priority | Nonpriority |

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| Debte | | rtinez Case number (if known) | |
|--------|---|--|-------------------|
| Part 2 | | | |
| | Do any creditors have nonpriority unsecured claims against you | | |
| i | No. You have nothing to report in this part. Submit this form to the Ves. | e court with your other schedules. | |
| | unsecured claim, list the creditor separately for each claim. For each | order of the creditor who holds each claim. If a creditor has more to claim listed, identify what type of claim it is. Do not list claims already increase in Part 3.If you have more than four priority unsecured claims fill out the | cluded in Part 1. |
| | | | Total claim |
| 4.1 | American InfoSource LP | Last 4 digits of account number | \$839.62 |
| | Nonpriority Creditor's Name Po Box 248838 | When was the debt incurred? | |
| | Number Street | <u></u> | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Oklahoma City Oklahoma 73124 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | |
| | Debtor 1 and Debtor 2 only | Student loans Obligations origing out of a consection agreement or diverse | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts ✓ Other. Specify due | |
| | <u>✓</u> No | • Other, opeony | |
| | Yes | | |
| 4.2 | American InfoSource LP Nonpriority Creditor's Name | Last 4 digits of account number | \$1,503.97 |
| | Po Box 248838 | When was the debt incurred?n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Oklahoma City Oklahoma 73124 City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | 님 | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt Is the claim subject to offset? | debts | |
| | No | ✓ Other. Specify <u>due</u> | |
| | Yes | | |
| 4.3 | American InfoSource LP (agent for Verizon) | Last 4 digits of account number | \$905.78 |
| | Nonpriority Creditor's Name PO Box 248838 | When was the debt incurred? | |
| | Number Street | <u></u> | |
| | c/o Amanda Matchett | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Oklahoma City Oklahoma 73124 | Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | odebts ✓ Other. Specify Verizon | |
| | ✓ No | | |
| | Yes | | |

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Debtor 1 Pablo Martinez Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Cerastes \$580.00 Last 4 digits of account number _ Nonpriority Creditor's Name 2001 WESTERN AVENUE, STE 400 When was the debt incurred? As of the date you file, the claim is: Check all that apply. WEINSTEIN, PINSON AND RILEY, PS Contingent Washington 98121 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed $\overline{\mathbf{V}}$ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ **✓** No Yes 4.5 Cerastes \$430.00 Last 4 digits of account number Nonpriority Creditor's Name 2001 WEŚTERN AVENUE, STE 400 When was the debt incurred? Street As of the date you file, the claim is: Check all that apply. WEINSTEIN, PINSON AND RILEY, PS Contingent 98121 Seattle Washington Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? due Other. Specify **V** No Yes 4.6 **CREDITORS DISCOUNT & A** \$315.00 Last 4 digits of account number _____1908 Nonpriority Creditor's Name 415 E MAIN ST When was the debt incurred? 10/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent STREATOR Illinois 61364 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ **✓** No

Yes

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Debtor 1 Pablo Martinez Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 **GINNYS** \$39.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1112 7TH AVE 8/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent **MONROE** Wisconsin 53566 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify **✓** No Yes **GINNY'S INC** 4.8 \$39.00 Last 4 digits of account number Nonpriority Creditor's Name 1112 7TH AVE POB 2816 When was the debt incurred? 8/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent **MONROE** Wisconsin 53566 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes Speedy Cash 4.9 \$1,530.82 Last 4 digits of account number Nonpriority Creditor's Name 8701 S Cottage Grove Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60619 Chicago Illinois State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify_ Is the claim subject to offset? **✓** No

Yes

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| Debtor 1 Pablo | | Martinez | Case number (if known) | |
|---|---------------------------|---------------------------|--|-------------|
| First Name | Middle Name | Last Name | | |
| Part 2: Your NONPRIORITY | / Unsecured Claims | - Continuation Page | | |
| After listing any entries of | on this page, number them | beginning with 4.5, follo | owed by 4.6, and so forth. | Total claim |
| 4.10 Springleaf Financial | | Last 4 digits | s of account number | \$1,745.12 |
| Nonpriority Creditor's Nam 3119 N. Lincoln | <u> </u> | When was t | the debt incurred? n/a | |
| Number Street | | As of the da | nte you file, the claim is: Check all that app | oly. |
| Chicago | Illinois 60657 | Continge | ent | |
| | State Zip Coo | de Unliquid | lated | |
| Who incurred the debt? | Check one. | Disputed | d | |
| Debtor 1 only | | Type of NON | NPRIORITY unsecured claim: | |
| Debtor 2 only | | Student I | loans | |
| Debtor 1 and Debtor 2 At least one of the debt | • | | ons arising out of a separation agreement of did not report as priority claims | or divorce |
| Check if this claim re | elates to a community deb | | pension or profit-sharing plans, and other | similar |
| Is the claim subject to of | ffset? | debts Other. S | Specify <u>due</u> | |
| Yes | | | | |

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Martinez Pablo Debtor 1 Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$7,928.31 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

\$7,928.31

6j. Total. Add lines 6f through 6i.

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| | | | • | | |
|---|---|-------------------------------|--------------------------|--|----------------|
| Fill in this inforn | nation to identify your cas | e: | | | |
| Debtor 1 | Pablo | | Martinez | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| | | | (State) | | |
| Case number (If known) | | | | | |
| | Form 106G le <mark>G: Execu</mark> t | ory Contracts | s and Unexp | pired Leases | amended filing |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). | | | | | |
| 1. Do you h | ave any executory | contracts or unexpir | ed leases? | | |
| ✓ No. Che | eck this box and file this fo | rm with the court with your c | ther schedules. You have | ve nothing else to report on this form. | |
| Yes. Fill | in all of the information b | elow even if the contracts or | leases are listed on Sch | hedule A/B: Property (Official Form 106A/B). | |
| | | | | e. Then state what each contract or lease is for more examples of executory contracts and unexpire | |

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| Fill in th | is information to identify your c | ase: | | |
|------------|--|------------------------------------|----------------------------------|--|
| Debtor | 1 Pablo | | Martinez | |
| | First Name | Middle Name | Last Name | _ |
| Debtor | | | | _ |
| (Spouse | e, if filing) First Name | Middle Name | Last Name | |
| United S | States Bankruptcy Court for the | : Northern | District of Illinois | |
| Case nu | umhor | | (State) | |
| (If know | | | | _ |
| | | | | Check if this is an amended filing |
| Offic | cial Form 106H | | | |
| Sche | edule H: Your C | Codebtors | | 12/15 |
| | | | | olete and accurate as possible. If two married people are filing |
| | every question. you have any codebtors? (If No Yes | you are filing a joint case, do | not list either spouse as a code | btor.) |
| | thin the last 8 years, have yo ho, Louisiana, Nevada, New Mo No. Go to line 3. | | | munity property states and territories include Arizona, California, |
| | Yes. Did your spouse, former | spouse, or legal equivalent li | ve with you at the time? | |
| | ✓ No | | | |
| | Yes. In which communit | y state or territory did you live? | ? Fill in th | ne name and current address of that person. |
| | Name of your spouse | , former spouse, or legal equi | valent valent | - |
| | Number Street | | | - |
| | City | State | Zip Code | - |
| aga | ain as a codebtor only if that | person is a guarantor or co | osigner. Make sure you have | Ir spouse is filing with you. List the person shown in line 2 listed the creditor on Schedule D (Official Form 106D), e.D, Schedule E/F, or Schedule G to fill out Column 2. |

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| | | D00 | union i | age or c | 71 03 | | | |
|------------------------|---|-------------------------------|--------------------------------|-------------------|-------------------|-------------------|-------------------|------------------------|
| Fill in th | is information to identif | y your case: | | | | | | |
| Debtor 1 | Pablo | | Martinez | <u>z</u> | _ | | | |
| Dalatano | First Name | Middle Name | Last Nar | ne | | Check if this is: | | |
| Debtor 2 (Spouse, i | f filing) First Name | Middle Name | Last Nar | ne | - | An amende | d filing | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of Illing | ois | _ | | | st-petition chapter 13 |
| Case num | nber | | (Sta | ite) | | expenses a | s of the followin | ig date. |
| (If known) | | | | | | MM / DD / ` | YYYY | |
| Officia | al Form 106l | | | | | | | |
| Sche | dule I: Your Inc | come | | | | | | 12/1 |
| addition | information about you al pages, write your na Describe Employme | ame and case numbe | | | | | orm. On the | top of any |
| 1. | Fill in your employment | | Debtor 1 | | | Debtor 2 | | |
| | information. If you have more than one job, | Employment status | Employed | | | Employed | | |
| | attach a separate page with information about additional | Occupation | laborer | | | laborer | | |
| | employers. | Employer's name | Amity Packin | g Co Inc. | | Ultipro | | |
| | Include part time, seasonal, or | Employer's address | 4220 S Kildar Number Street | | | 600 West Ch | icago Avenue # | # Suite 725 |
| | self-employed work. | | Number Street | | | Number Street | | |
| | Occupation may include student | | | | | | | |
| | or homemaker, if it applies. | | Chicago City | Illinois State | 60632 Zip Code | Chicago City | Illinois State | 60654 Zip Code |
| | | How long employed there? | 29 years 8 m | onths | | 3 months | | |
| Estimate you are s | Give Details About e monthly income as of the reparated. your non-filing spouse have mo | date you file this form. If y | | | | | - | |
| attach a | separate sheet to this form. | | | For D | ebtor 1 | For Debtor 2 | or | |
| 0 | | | | | | non-filing sp | | |
| | t monthly gross wages, sala luctions.) If not paid monthly, ca | • . | | <u> </u> | \$3,449.77 | | \$2,095.47 | |

+ \$0.00

\$2,095.47

\$3,449.77

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

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| Debio | First Name | Middle Name | Lost Nome | Case number (| if known) | | |
|-----------------------|--|---|-----------------------|------------------------|-----------------------------------|-------|-------------------------|
| | First Name | Middle Name | Last Name | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Cop | y line 4 here | | → 4. | \$3,449.77 | \$2,095.47 | | |
| 5. List | all payroll deduc | | | | | | |
| 5a. | Tax, Medicare, a | nd Social Security deductions | 5a | \$504.79 | \$377.17 | | |
| 5b. | Mandatory cont | ributions for retirement plans | 5b | \$0.00 | \$0.00 | | |
| 5c. | Voluntary contri | butions for retirement plans | 5c | \$0.00 | \$0.00 | | |
| 5d. | Required repays | ments of retirement fund loans | 5d | \$0.00 | \$0.00 | | |
| 5e. | Insurance | | 5e | \$156.00 | \$0.00 | | |
| 5f. I | Domestic suppo | rt obligations | 5f | \$0.00 | \$0.00 | | |
| 5g. | Union dues | | 5g | \$0.00 | \$101.83 | | |
| 5h. | Other deduction | s. Specify: | 5h. + _ | \$0.00 + | \$0.00 | | |
| 6. Add +5h. | the payroll dedu | uctions. Add lines 5a + 5b + 5c + 5d + 5e +5f | f + 5g 6 | \$660.79 | \$479.01 | | |
| 7. Calc | culate total mont | hly take-home pay. Subtract line 6 from line | 4. 7. <u> </u> | \$2,788.98 | \$1,616.46 | | |
| 8. List | all other income | regularly received: | | | | | |
| | business, profes | • | | | | | |
| | | nt for each property and business showing gro- and necessary business expenses, and the tot e. | | \$0.00 | \$0.00 | | |
| 8b. | Interest and div | idends | 8b | \$0.00 | \$0.00 | | |
| | Family support dependent regul | payments that you, a non-filing spouse, or arly receive | ra | | | | |
| | | pousal support, child support, maintenance, t, and property settlement. | 8c | \$0.00 | \$0.00 | | |
| 8d. | Unemployment | compensation | 8d | \$0.00 | \$0.00 | | |
| 8e. | Social Security | | 8e | \$0.00 | \$0.00 | | |
| | Include cash assis assistance that you the Supplemental subsidies | nt assistance that you regularly receive tance and the value (if known) of any non-cash u receive, such as food stamps (benefits under Nutrition Assistance Program) or housing | | \$0.00 | \$0.00 | | |
| | Specify: Pension or retire | ement income | oi 8g. | \$0.00 | \$0.00 | | |
| · | | ncome. Specify: | _ | \$0.00 + | | | |
| | | | | \$0.00 | | | |
| 9. Add | an other income | Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | 8h. 9 | \$0.00 | \$0.00 | | |
| | | ncome. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing sp | 10 | \$2,788.98 + | \$1,616.46 | = | \$4,405.44 |
| Incl rela | lude contributions tatives. | lar contributions to the expenses that you from an unmarried partner, members of your hounts already included in lines 2-10 or amounts. | ousehold, your deper | ndents, your roommates | | | |
| Spe | ecify: | | | | | 11. + | \$0.00 |
| | | the last column of line 10 to the amount in | | | | 12. | \$4,405.44 |
| V V I I | to a fact arribuilt Offi | and Sammary of Contoducto and Cicusileal Gull | inary or contain Liab | maco ana nolatea Data, | п к арриоо | | Combined monthly income |
| 13. Do | you expect an ir | ncrease or decrease within the year after yo | ou file this form? | | | | , |
| | Yes. Explain: | | | | | | |

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| Fill in this infor | mation to identify your o | case: | | | | |
|----------------------------|---------------------------|--|---|-------------------|------------------------|------------|
| Debtor 1 | Pablo | | Martinez | | | |
| Debior 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | Check if this is: | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name | An amended filing | 3 | |
| United States I | Bankruptcy Court for the | e: Northern | District of Illinois | A supplement sho | | chapter 13 |
| Casa numbar | | | (State) | expenses as of th | e following date: | |
| Case number (If known) | | | | MM / DD / YYYY | , | |
| Official | Form 106J | | | , 22 , | | |
| - | le J: Your E | ynenses | | | | 12/15 |
| | | • | | | | 12/13 |
| information. If | more space is neede | | e filing together, both are equally roorm. On the top of any additional | | | nber |
| | swer every question. | | | | | |
| | cribe Your House | ehold | | | | |
| 1. Is this a joi | nt case? | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| Yes. D | oes Debtor 2 live in a | separate household? | | | | |
| | No | | | | | |
| Г | Yes. Debtor 2 must | file Official Forms 106J-2, Expens | ses for Separate Household of Debto | · 2. | | |
| 2. Do you hav | /e 🔽 | No | · | | | |
| dependents? | · <u> </u> | | | | | |
| Do not list D Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depende with you? | nt live |
| | penses include | No | | | | |
| than | of people other | | | | | |
| yourself an dependent | | Yes | | | | |
| черепиет | 5 : | | | | | |
| Part 2: Esti | mate Your Ongoir | ng Monthly Expenses | | | | |
| _ | of a date after the bar | | ou are using this form as a supploplemental Schedule J, check the l | • | • | • |
| | • | n-cash government assistance d it on Schedule I: Your Income | • | | Your | expenses |
| | | | clude first mortgage payments and | | | |
| | or the ground or lot. 4. | Aponaca for your residence. | Siddo ilist mortgage payments and | | 4. | \$1,200.00 |
| If not inc | luded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Prope | rty, homeowner's, or rer | nter's insurance | | | 4b | \$0.00 |
| 4c. Home | maintenance, repair, and | d upkeep expenses | | | 4c | \$100.00 |
| 4d. Home | owner's association or o | condominium dues | | | 4d. | \$0.00 |

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Martinez

Debtor 1

Pablo

Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$350.00 6a. 6b. Water, sewer, garbage collection \$150.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$300.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$560.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$250.00 10. Personal care products and services \$200.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$500.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$295.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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| Debtor 1 | | | Martinez | Case number (if known) | | |
|-------------------|-------------------------|---------------------------------------|--------------------------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | . Specify: | | | | 21 | \$0.00 |
| | | | | | | |
| 22. Calc u | ılate your monthly e | expenses. | | | | \$3,905.00 |
| 22a. <i>F</i> | odd lines 4 through 21 | | | | | \$0.00 |
| 22b. C | Copy line 22 (monthly | expenses for Debtor 2), if any, fro | m Official Form 106J-2 | | | \$3,905.00 |
| 22c. A | dd line 22a and 22b. | The result is your monthly expens | ses. | | 22. | |
| 23.Calcu | late your monthly n | et income. | | | | |
| 23a. C | Copy line 12 (your com | nbined monthly income) from Sch | edule I. | | 23a | \$4,405.44 |
| 23b. C | copy your monthly exp | enses from line 22 above. | | | 23b | \$3,905.00 |
| 23c. S | Subtract your monthly e | expenses from your monthly incor | ne. | | | \$500.44 |
| • | The result is your mor | nthly net income. | | | 23c | |
| 24. Do y o | ou expect an increas | se or decrease in your expens | es within the year after you | ı file this form? | | |
| For e | example, do you expe | ct to finish paying for your car loar | n within the year or do you ex | pect your | | |
| | | ease or decrease because of a n | | | | |
| 1 | No | | | | | |
| | ⁄es | | | | | |
| | Explain here | | | | | |
| | Explain note | • | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this information to identify your case: | | | | |
|---|--------------------------|-------------|------------------------------|---|
| Debtor 1 | Pablo | | Martinez | |
| | First Name | Middle Name | Last Name | _ |
| Debtor 2 | | | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | _ |
| United States B | ankruptcy Court for the: | Northern | District of Illinois (State) | _ |
| Case number (If known) | | | (State) | - |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t1: Sign Below | |
|-----|---|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | elp you fill out bankruptcy forms? |
| | ☑ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary at that they are true and correct. | nd schedules filed with this declaration and |
| x | · | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 10/19/2016 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| | | 5 . | | | | |
|-----------------|--|--|---|--|----------|---|
| Debtor 1 | ormation to identify your case Pablo | | Martinez | | | |
| Debior 1 | First Name | Middle Name | Last Nam | | | |
| Debtor 2 | \- | | | | | |
| (Spouse, if fil | ling) First Name | Middle Name | Last Nam | ne | | |
| United States | s Bankruptcy Court for the: | Northern | District of Illino | | | |
| Case numbe | r | | (Stat | te) | | |
| (If known) | | | | | | _ |
| Official | Form 107 | | | | | Check if this is amended filing |
| | - | | | | | · · |
| Statem | ent of Financ | ial Affairs fo | r Individu | als Filing for Ba | nkruptcy | / 12 |
| 1. What | ve Details About Your is your current marital sta | | l Where You Liv | ved Before | | |
| 2. During | g the last 3 years, have you lo fes. List all of the places you le bebtor 1: | ived in the last 3 years. Do | o not include where y | | | Dates Debtor 2 lived there |
| 2. During | g the last 3 years, have yould | ived in the last 3 years. Do | o not include where y | ou live now. | | |
| 2. Durin | g the last 3 years, have you lookes. List all of the places you leebtor 1: | ived in the last 3 years. Do Date there | o not include where y es Debtor 1 lived e | Debtor 2: Same as Debtor 1 | | there Same as Debtor 1 |
| 2. Durin | g the last 3 years, have yould | ived in the last 3 years. Do Date there | o not include where y | Debtor 2: | | there Same as Debtor 1 From |
| 2. Durin | g the last 3 years, have you lookes. List all of the places you leebtor 1: | ived in the last 3 years. Do Date there | o not include where y es Debtor 1 lived e | Debtor 2: Same as Debtor 1 | | there Same as Debtor 1 |
| 2. During | g the last 3 years, have you lookes. List all of the places you leebtor 1: | Date there From | o not include where y es Debtor 1 lived e | Debtor 2: Same as Debtor 1 Number Street | Zip Code | there Same as Debtor 1 From |
| 2. Durin | g the last 3 years, have you lookes. List all of the places you leebtor 1: | ived in the last 3 years. Do Date there | o not include where y es Debtor 1 lived e | Debtor 2: Same as Debtor 1 | Zip Code | there Same as Debtor 1 From |
| 2. Durin | g the last 3 years, have you lookes. List all of the places you leebtor 1: | Date there From | o not include where y es Debtor 1 lived e | Debtor 2: Same as Debtor 1 Number Street City State | Zip Code | there Same as Debtor 1 From To |
| 2. During | g the last 3 years, have you lookes. List all of the places you leebtor 1: | Date there From | o not include where y | Debtor 2: Same as Debtor 1 Number Street City State | Zip Code | there Same as Debtor 1 From To |
| 2. During | g the last 3 years, have you lookes. List all of the places you leebtor 1: | Date there From To Zip Code | o not include where y | Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| 2. During | g the last 3 years, have you lookes. List all of the places you leebtor 1: | Date there From Zip Code From | o not include where y | Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From Tro Tro Tro Tro Tro Tro Tro Tro Tro Tr |

✓ No

territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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| Deb | tor 1 | | | rtinez | Case number (if known) | |
|------|----------------------------------|--|--|---|--|--|
| | | First Name Middle | | Name | | |
| Part | 2: | Explain the Sources of Your I | ncome | | | |
| | Fill i | you have any income from employmenthe total amount of income you receive rities. If you are filing a joint case and you No Yes. Fill in the details. | d from all jobs and all bus | sinesses, including part-tii | me | r years? |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions exclusions) | Sources of income and Check all that apply. | Gross income (before deductions and exclusions) |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$43372.00 | Wages, commissions, bonuses, tips Operating a business | |
| | | or last calendar year: anuary 1 to December 31, 2015) YYYY | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$43094.85 | Wages, commissions, bonuses, tips Operating a business | |
| | | or the calendar year before that: anuary 1 to December 31, 2014) YYYY | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$38011.06 | Wages, commissions, bonuses, tips Operating a business | |
| | Inclui bene case List e | you receive any other income during to de income regardless of whether that income fit payments; pensions; rental income; in and you have income that you received to each source and the gross income from the No Yes. Fill in the details. | ome is taxable. Examples terest; dividends; money ogether, list it only once u | s of other income are alim collected from lawsuits; ronder Debtor 1. | oyalties; and gambling and lottery v | |
| | _ | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income freach source (before deduction exclusions) | Describe below. | Gross income from each source (before deductions and exclusions) |
| | | from January 1 of current year until he date you filed for bankruptcy: | | | _ | |
| | | For last calendar year: January 1 to December 31, 2015) YYYY | | | | |
| | | For the calendar year before that: January 1 to December 31, 2014) YYYYY | | | | |
| | | | | <u> </u> | | <u></u> |

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| First Name | | Middle Name | Last Name | | IIIDei (// khown) | |
|-------------------|------------------|--|-------------------------------|---|----------------------------------|----------------------------|
| | | | | | | |
| List Cer | tain Paymer | nts You Made I | Before You Filed fo | r Bankruptcy | | |
| a aithar Dahi | tor 1's or Debt | or 2's debts nrim: | arily consumer debts? | | | |
| _ | | | - | | | |
| - | | r Debtor 2 has pri al, family, or househ | - | . Consumer debts are define | ed in 11 U.S.C. § 101(8) as "ind | curred by an individual |
| During | the 90 days be | fore you filed for ba | nkruptcy, did you pay any | creditor a total of \$6,425* or | more? | |
| ■ N | o. Go to line 7. | | | | | |
| ☐ Y | total amour | nt you paid that cred | ditor. Do not include paym | 25* or more in one or more p ents for domestic support ob s to an attorney for this bankr | oligations, such as | |
| * Subje | ect to adjustmen | nt on 4/01/19 and ev | very 3 years after that for o | cases filed on or after the date | e of adjustment. | |
| Yes. Debto | or 1 or Debtor 2 | 2 or both have pri | imarily consumer debts | s. | | |
| • | | _ | - | creditor a total of \$600 or mo | are? | |
| _ | | nore you med for ba | ii iniupicy, diu you pay ariy | discultor a total of 9000 of THC | n ∈ : | |
| | o. Go to line 7. | | | | | |
| _ | that credito | r. Do not include pa | | or more and the total amour port obligations, such as chil this bankruptcy case. | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | | | | | _ | Mortgage |
| Creditor's I | Name | | | | | Car |
| Number St | reet | | | | | Credit card |
| | | | | | | Loan repayme |
| City | State | Zip Code | | | | Suppliers or vendors |
| Oity | Olale | Zip Oode | | | | Other |
| Creditor's I | Name | | | | | Mortgage |
| Number St | root | | | | | Car |
| | | | | | | Credit card Loan repaymen |
| | | | | | | Suppliers or |
| City | State | Zip Code | | | | vendors |
| | | | | | | Other |
| Creditor's I | Name | | | | | ☐ Mortgage ☐ Car |
| Number St | reet | | | | | Credit card |
| | | | | | | Loan repayme |
| 0:1- | 01-1- | 7. 0. 1. | | | | Suppliers or |
| City | State | Zip Code | | | | vendors |
| | | | | | | Other |

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| ebtor 1 | Pablo | | M | artinez | Case number | (if known) |
|-----------------------|-------------------------------------|--|---------------------------------------|---|--|--|
| | First Name | Middle Name | La | st Name | | |
| Insid corp ager | orations of which you are | s; any general partners e an officer, director, pe siness you operate as a | ; relatives of any rson in control, o | general partners; par r owner of 20% or mo | tnerships of which yore of their voting se | who was an insider? you are a general partner; curities; and any managing comestic support obligations, |
| V | No Van Lint all a server of a te | | | | | |
| Ш | Yes. List all payments to | an insider. | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | - ——— | | |
| | Number Street | | | | | |
| | | | | | | |
| _ | City State | Zip Code | | | | |
| | Insider's Name | | | | | |
| | Number Street | | | | | |
| | 0:: | 7: 0 1 | | | | |
| - | City State | Zip Code | | | | |
| insid Inclu | | uaranteed or cosigned b | | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | - | | |
| | Number Street | | | | | |
| | | | | | | |
| _ | City State | Zip Code | | | | |
| | Insider's Name | | | | | |
| | Number Street | | | | | |
| | | | | | | |
| | City State | Zip Code | | | | |

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| Deb | tor 1 | Pablo | | | Martinez | c | Case number (if | known) | |
|------|-----------------------|--|--------------------------|-----------|---------------------------------|------------------|-----------------|----------|-------------------------------------|
| | | First Name | Middle Name | | Last Name | | | | |
| Part | 4: | Identify Legal Ad | ctions, Repossessi | ions, aı | nd Foreclosure | es | | | |
| | With List a | in 1 year before you | filed for bankruptcy, we | ere you a | party in any laws | uit, court actio | | | ng? r custody modifications, and |
| | | No Yes. Fill in the details. | | | | | | | |
| | | | | Nature o | f the case | Court or a | agency | | Status of the case |
| | | Case title | | | | Operat Na | | | Pending |
| | | Coco number | | | | Court Nan | ne | | On appeal |
| | | Case number | | | | NumberSt | reet | | Concluded |
| | | | | | | City | State | Zip Code | |
| | | Case title | | | | | | | Pending |
| | | | | | | Court Nan | ne | | On appeal |
| | | Case number | | | | NumberSt | reet | | Concluded |
| | | | | | | City | State | Zip Code | |
| | | No. Go to line 11. Yes. Fill in the information | ation below. | | Describe the prop | erty | | Date | Value of the property |
| | | | | | | | | | |
| | | Creditor's Name | | | Explain what happ | pened | | | |
| | | Number Street | | | | | | | |
| | | | | | Property was re | • | | | |
| | | | | · | Property was it | | | | |
| | | City | State Zip Code | | | ttached, seized, | or levied. | | |
| | | | | | Describe the prop | erty | | Date | Value of the property |
| | | Creditor's Name | | | | | | | |
| | | Orealtor 3 Name | | | Explain what happ | pened | | | |
| | | Number Street | | | | | | | |
| | | | | | Property was re Property was fo | | | | |
| | | | | ' | Property was to | | | | |
| | | City | State Zip Code | | | ttached, seized, | or levied. | | |

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| Debt | tor 1 | Pablo | Martinez | Case number (if known) | |
|------|----------|--|--|---|------------------------------|
| | | First Name Middle Name | Last Name | | |
| 11. | | hin 90 days before you filed for bankruptcy, did ounts or refuse to make a payment because yo | | nk or financial institution, set off ar | y amounts from your |
| | | No Yes. Fill in the details. | | | |
| | | | Describe the action the | creditor took Date a was ta | |
| | | | | | |
| | | Creditor's Name | _ | | |
| | | Number Street | _ | | |
| | | | _ Last 4 digits of account nu | ımber: XXXX- | |
| | | City State Zip Code | - | | |
| 12. | | hin 1 year before you filed for bankruptcy, was ointed receiver, a custodian, or another officia | | ossession of an assignee for the be | nefit of creditors, a court- |
| | | No | | | |
| | | Yes | | | |
| Part | 5: | List Certain Gifts and Contributions | | | |
| 40 | 140 | this Comment of the C | decreased as a second floor and the second | 1-1 | 0 |
| 13. | Wi | thin 2 years before you filed for bankruptcy, did | d you give any gifts with a to | tal value of more than \$600 per pers | ion? |
| | ✓ | No | | | |
| | | Yes. Fill in the details for each gift. | | | |
| | | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates gave t gifts | |
| | | | _ | | <u> </u> |
| | | Person to Whom You Gave the Gift | - | | |
| | | Number Street | - | | |
| | | City State Zip Code | - | | |
| | | Person's relationship to you | | | |
| | | | | | |
| | | Person to Whom You Gave the Gift | - | | |
| | | Number Street | _ | | |
| | | Oit. | _ | | |
| | | City State Zip Code | | | |
| | | Person's relationship to you | | | |

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| Debt | tor 1 | Pablo First Name | Middle Name | Martinez Last Name | Case number (if known) | | |
|------|-------------|---|---|--|---|----------------------|------------------------|
| 14. | Wit | hin 2 years before you filed for No Yes. Fill in the details for each g | | ou give any gifts or contribu | utions with a total value of | more than \$600 t | o any charity? |
| | | Gifts or contributions to chat that total more than \$600 | | Describe what you contr | ibuted | Date you contributed | Value |
| | | Charity's Name | | | | | |
| | | Number Street | | | | | |
| Part | 6. | City State List Certain Losses | Zip Code | | | | |
| 15. | | hin 1 year before you filed for the hilling? No Yes. Fill in the details. Describe the property you lose how the loss occurred | | Describe any insurance Include the amount that inspending insurance claims of A/B: Property. | coverage for the loss eurance has paid. List | Date of your loss | Value of property lost |
| Part | 7. | List Certain Payments or | Transfara | | | | |
| 16. | Witl abo | hin 1 year before you filed for but seeking bankruptcy or prepude any attorneys, bankruptcy pet No Yes. Fill in the details. | oankruptcy, did you aring a bankruptcy | petition? | ervices required in your bank | | Amount of payment |
| | | LAW FIRM Person Who Was Paid 11101 S. Western Avenue Number Street | | Attorney's Fee - 0.00 | | 02/2016 | \$0.00 |
| | | Chicago Illinois City State | 60643 Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Payment | i, if Not You | | | | |
| | | Person Who Was Paid | | | | | - |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Payment | . if Not You | | | | |

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| Deb | tor 1 | Pablo | | Martinez | Case number (if known |) | |
|-----|-------|---|------------------------|---|------------------------------|---|------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | hin 1 year before you filed by you deal with your credito not include any payment or tra No Yes. Fill in the details. | ors or to make payment | s to your creditors? | your behalf pay or transfer | any property to anyo | ne who promised to |
| | | res. I ili ili tre details. | | | | | |
| | | | | Description and value o transferred | f any property | | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | City State | Zip Code | | | | |
| | | ude both outright transfers an sfers that you have already lis No Yes. Fill in the details. | | | | | |
| | | | | Description and value or property transferred | | y property or eceived or debts paic e | Date transfer was made |
| | | Person Who Received Trans | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Tran | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| 19. | | hin 10 years before you file ese are often called asset-pro | | ou transfer any property to | a self-settled trust or simi | lar device of which y | ou are a beneficiary? |
| | | No Yes. Fill in the details. | | | | | |
| | Ц | 103. I III III UIC UCIAIIS. | | Description and value | of the property transferred | d | Date transfer was made |
| | | Name of trust | | | | | |

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| Debte | or 1 | Pablo First Name Middle Name | Martinez Last Name | Case number (if known) | |
|--------|-------------|--|-----------------------------------|---|--|
| Part 8 | g. | List Certain Financial Accounts, Inst | | ayes and Storage Units | |
| 20. | With mov | nin 1 year before you filed for bankruptcy, wer red, or transferred? | e any financial accounts or inst | ruments held in your name, or for your benefit, consit; shares in banks, credit unions, brokerage houses. | |
| | ✓ | No Yes. Fill in the details. | | | |
| | | | Last 4 digits of account number | Type of account or instrument account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | Person Who Was Paid | XXXX- | Checking Savings | |
| | | Number Street | | Money market Brokerage Other | |
| | | City State Zip Code | | | |
| | | Person Who Was Paid | XXXX- | Checking Savings | |
| | | Number Street | | Money market Brokerage | |
| | | | | Other | |
| | | you now have, or did you have within 1 year beer valuables? No Yes. Fill in the details. | efore you filed for bankruptcy, a | ny safe deposit box or other depository for secu | |
| | | | Who else had access to it? | Describe the contents | Do you still have it? |
| | | Name of Financial Institution | Name | <u> </u> | ☐ No ☐ Yes |
| | | Number Street | Number Street City State Zip | . Code | _ |
| | | City State Zip Code | City State Zip | o Code | |
| 22. | Hav | e you stored property in a storage unit or plac | e other than your home within | 1 year before you filed for bankruptcy? | |
| | ✓ | No Yes. Fill in the details. | | | |
| | | | Who else had access to it? | Describe the contents | Do you still have it? |
| | | Name of Storage Facility | Name | | ☐ No ☐ Yes |
| | | Number Street | Number Street | | |
| | | City State Zip Code | City State Zip | o Code | |

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| ebtor 1 | | Martinez Case number (if known) | |
|--------------|--|---|----------------|
| | First Name Middle Name | Last Name | |
| rt 9: | Identify Property You Hold or Co | ntrol for Someone Else | |
| | | | |
| | you hold or control any property that som meone. | neone else owns? Include any property you borrowed from, are storing for, or hole | d in trust for |
| 301 | neone. | | |
| ✓ | No | | |
| | Yes. Fill in the details. | | |
| | | Where is the property? Describe the contents | Value |
| | | _ | |
| | Owner's Name | Number Street | |
| | Number Street | | |
| | Number Street | | |
| | · | City State Zip Code | |
| | | | |
| | City State Zip Code | | |
| art 10: | Give Details About Environment | al Information | |
| | 2 2 Detaile / Local Environment | w | |
| or the | purpose of Part 10, the following definitions ap | ply: | |
| - 1 | Environmental law means any federal, state, or | r local statute or regulation concerning pollution, contamination, releases of | |
| | | erial into the air, land, soil, surface water, groundwater, or other medium, | |
| i | ncluding statutes or regulations controlling the | e cleanup of these substances, wastes, or material. | |
| = (| Site means any location, facility, or property as | defined under any environmental law, whether you now own, operate, or utilize it | |
| C | or used to own, operate, or utilize it, including of | disposal sites. | |
| = / | Hazardous material means anything an environ | | |
| | | nmental law defines as a hazardous waste. hazardous substance. | |
| | oxic substance, hazardous material, pollutant, | nmental law defines as a hazardous waste, hazardous substance, contaminant, or similar term. | |
| t | oxic substance, hazardous material, pollutant, | contaminant, or similar term. | |
| t | oxic substance, hazardous material, pollutant, | | |
| t eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you | contaminant, or similar term. know about, regardless of when they occurred. | a |
| t eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you | contaminant, or similar term. | v? |
| t eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you | contaminant, or similar term. know about, regardless of when they occurred. | v? |
| t eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you sany governmental unit notified you that | contaminant, or similar term. know about, regardless of when they occurred. | v? |
| t eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you sany governmental unit notified you that you | contaminant, or similar term. know about, regardless of when they occurred. | |
| t eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you sany governmental unit notified you that you | contaminant, or similar term. know about, regardless of when they occurred. you may be liable or potentially liable under or in violation of an environmental law | |
| t eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you so any governmental unit notified you that you like the like | contaminant, or similar term. know about, regardless of when they occurred. you may be liable or potentially liable under or in violation of an environmental law Governmental unit Environmental law, if you know it | Date of |
| t eport a | oxic substance, hazardous material, pollutant, all notices, releases, and proceedings that you sany governmental unit notified you that you | contaminant, or similar term. know about, regardless of when they occurred. you may be liable or potentially liable under or in violation of an environmental law | Date of |
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| Deb | tor 1 | Pablo | | | Martinez | Case | number (if known) | |
|------|----------|-----------------------|------------------|---------------------|-------------------------------|-----------------------|--|--------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | Hav | e you been a party | / in any judici | al or administra | tive proceeding under | any environmenta | al law? Include settlements and order | s. |
| | ✓ | No | | | | | | |
| | | Yes. Fill in the deta | ils. | | | | | |
| | | | | • | Court or agency | | Nature of the case | Status of the case |
| | | Case title | | | | | | |
| | | | | | Court Name | | | Pending |
| | | | | <u> </u> | odit ramo | | | On appeal |
| | | Case number | | | Number Street | _ | | Concluded |
| | | | | - | City State | Zip Code | | |
| | | | | | | | | |
| Part | 111: | Give Details A | bout Your | Business or | Connections to An | ny Business | | |
| 27. | With | nin 4 vears hefore | you filed for l | hankruntev did | vou own a business or | have any of the fo | ollowing connections to any business | .2 |
| 21. | VVILI | iiii 4 years belore | you med for i | banki upicy, uiu | you own a business or | nave any or the n | ollowing connections to any business |) f |
| | | A sole propriet | tor or self-emp | loyed in a trade, p | orofession, or other activit | y, either full-time o | r part-time | |
| | | | | - | or limited liability partners | | • | |
| | | A partner in a | - | ,, (===) | | | | |
| | | | | ing executive of a | corporation | | | |
| | | | _ | - | | _ | | |
| | | An owner or at | i least 5% of th | e voting or equity | securities of a corporation | on | | |
| | V | No. None of the abo | ove applies. Go | to Part 12. | | | | |
| | Ħ | | | | below for each business | i. | | |
| | | | | | Describe the natu | | s Employer Identification n | umber Do not |
| | | | | | Describe the nati | ire or the busines | include Social Security nu | |
| | | | | | | | | |
| | | Business Name | | | - | | EIN: | |
| | | Dadinoco Hamo | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | rambol Guode | | | Name of account | ant or bookkeepe | er | |
| | | City | State | Zip Code | _ | | From To | |
| | | Oity | Olalo | Zip Code | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | re of the busines | | |
| | | | | | | | include Social Security nu | imber or IIIN. |
| | | Business Name | | | _ | | EIN: | |
| | | Dusiness Name | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | TAULIDEL SUEEL | | | Name of account | ant or bookkeepe | er | |
| | | City | Ctota | 7:00-1- | _ | | FromTo | |
| | | City | State | Zip Code | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ire of the busines | Employer Identification n include Social Security no | |
| | | | | | | | EIN: | |
| | | Business Name | | | _ | | LIIV. | |
| | | | | | | | | |
| | | Number Street | | | - New of | | Dates business existed | |
| | | | | | Name of account | ant or bookkeepe | | |
| | | City | State | Zip Code | | | From To | |
| | | - | | - | | | | |
| | | | | | | | | |
| | | | | | | | I I | |

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| Deb | tor 1 | Pablo | | Martinez | Case number (if known) |
|------|----------|---|------------------------------|------------------------------|---|
| | | First Name | Middle Name | Last Name | |
| 28. | | nin 2 years before you f litors, or other parties. | iled for bankruptcy, did you | give a financial statement | to anyone about your business? Include all financial institutions, |
| | Y | No Yes. Fill in the details belo | OW | | |
| | Ч | | ··· | Date issued | |
| | | Name | | MM/DD/YYYY | |
| | | Number Street | | | |
| | | City Sta | ate Zip Code | | |
| | | · | 2.p 0000 | | |
| Part | 12: | Sign Below | | | |
| 1 | true a | and correct. I understan | nd that making a false state | nent, concealing property | ts, and I declare under penalty of perjury that the answers are , or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | X ///Palla | | | × |
| | | /s/ Pablo Signature of | Martinez Debtor 1 | | Signature of Debtor 2 |
| | | Date 10/19/ | 2016 | | Date 10/19/2016 |
| ı | Did y | ou attach additional pa | ges to Your Statement of Fi | nancial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
| ı | V | lo | | | |
| i | Y | ′es | | | |
| I | Did y | ou pay or agree to pay | someone who is not an atto | rney to help you fill out ba | nkruptcy forms? |
| | V N | lo | | | |
| İ | Y | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to \$726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$382.00

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- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$72.00 for expenses, leaving a balance due of \$4,382.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 10/19/2016

Signed:

/s/Pablo Martinez

Debtor(s)

/s/ Mark Bernachea

Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distric | t of Illinois | |
|-------|---|-------------------------------------|-------------------------------------|-------------------------------|
| ln re | Pablo Martinez ; | | Case No. | |
| - | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF C | COMPENSATION | OF ATTORNEY FO | OR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and I that compensation paid to me within services rendered or to be rendered is as follows: | one year before the filing of | of the petition in bankruptcy, or a | agreed to be paid to me, for |
| | For legal services, I have agreed to | accept | | \$4,000.0 |
| | Prior to the filing of this statement I | have received | | \$0.0 |
| | Balance Due | | | \$4,000.0 |
| 2. | The source of the compensation paid | d to me was: | | |
| | ✓ Debtor | Other (specify) | | |
| 3. | The source of the compensation paid | d to me is: | | |
| | ✓ Debtor | Other (specify) | | |
| 4. | I have not agreed to share the a members and associates of my | bove-disclosed compensate law firm. | tion with any other person unless | s they are |
| | I have agreed to share the above members or associates of my la the people sharing in the compe | aw firm. A copy of the agre | | |
| 5. | In return for the above-disclosed fee a. Analysis of the debtor's finance bankruptcy; | _ | - | · · · |
| | b. Preparation and filing of any | petition, schedules, statem | nents of affairs and plan which m | nay be required; |
| | c. Representation of the debtor | at the meeting of creditors | and confirmation hearing, and a | ny adjourned hearings thereof |
| | d. Representation of the debtor | in adversary proceedings | and other contested bankruptcy | matters; |
| 6. | By agreement with the debtor(s), the | above-disclosed fee does | not include the following service | es: |
| | | | | |
| | | | | |
| | | CERTIFICA | TION | |
| | I certify that the foregoing is a comple ne debtor(s) in this bankruptcy proceed | | ment or arrangement for payme | nt to me for representation |
| | 10/19/2016 | | /s/ Mark Bernachea | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | - | | Name of law firm | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Martinez, Pablo ; | Case No | Case No | | |
|--------|---------------------------------------|---|---|--|--|
| | Debtor(s) | Chapter. | Chapter13 | | |
| | VERIFIC | CATION OF CREDITOR MAT | RIX | | |
| | The above named Debtors hereby verify | that the attached list of creditors is true | and correct to the best of their knowledge. | | |
| | | | | | |
| Date: | 10/19/2016 | /s/ Martinez, Pab | 0 | | |
| | | Martinez, Pablo Signature of Debi | or | | |
| | | | | | |
| | | /s/ | | | |
| | | Signature of Joint | Debtor | | |

CREDITORS DISCOUNT & A 415 E MAIN ST STREATOR , IL 61364

GINNY'S INC 1112 7TH AVE POB 2816 MONROE , WI 53566

GINNYS 1112 7TH AVE MONROE , WI 53566

Portfolio Recovery PO BOx 41067 c/o Nicole Enochs Norfolk , VA 23541

Springleaf Financial 20 N Clark St Ste 2600 Chicago , IL 60602

American InfoSource LP PO Box 248848 c/o Amanda Matchett Oklahoma City , OK 73124

American InfoSource LP (agent for Verizon) PO Box 248838 c/o Amanda Matchett Oklahoma City , OK 73124

Cerastes 2001 WESTERN AVENUE, STE 400 c/o Taylor Bartle, Seattle, WA 98121

American InfoSource LP PO Box 248848 c/o Amanda Matchett Oklahoma City , OK 73124

Cerastes 2001 WESTERN AVENUE, STE 400 c/o Taylor Bartle, Seattle, WA 98121

Speedy Cash Po Box 101928 Birmingham , AL 35210 Case 16-33393 Doc 1 Filed 10/19/16 Entered 10/19/16 16:33:54 Desc Main Document Page 61 of 65

| Debtor 1 Pablo First Name | Marti Middle Name Last N | | number (ffknown) | |
|---|---|---|---|---|
| | estions for Reporting Purposes | varie | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily con "incurred by an individual pring. No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bus | marily for a personal, fam siness debts? <i>Business o</i> stment or through the op | debts are debts that you incurred to obtain peration of the business or investment. | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that funds No. | Oo you estimate that after ar | ny exempt property is excluded and administra ute to unsecured creditors? | ative |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million \$1,000,000,001-\$10 bi 0 million \$10,000,000,001-\$50 | illion |
| 20. How much do you estimate your liabilities to be? | | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million \$1,000,000,001-\$10 bi 0 million \$10,000,000,001-\$50 l | illion |
| Part 7: Sign Below | 11 | 1-1 | | |
| | correct. If I have chosen to file under Chapte of title 11, United States Code. I un under Chapter 7. If no attorney represents me and I dout this document, I have obtained I request relief in accordance with the I understand making a false statement. | er 7, I am aware that I manderstand the relief available lid not pay or agree to pay and read the notice require chapter of title 11, Unitent, concealing property, can result in fines up to \$1.00. | ited States Code, specified in this petition. , or obtaining money or property by fraud in \$250,000, or imprisonment for up to 20 ye | 12, or 13 oceed me fill |
| | MM / DD / YY | ~~ | MM / DD / YYYY | *************************************** |

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| Debtor 1 | Pablo | | Martinez |
|---------------------|---------------------------|-------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number | | | |

Official Form 106Dec

| | Check if | this | is | a |
|----------------|----------|---------|----|---|
| in the same of | amende | d filir | าก | |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to h | elp you fill out bankruptcy forms? |
| | ☑ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Pablo Martinez April Mofnet | * |
| | Signature of Debtor 🕯 🧳 | Signature of Debtor 2 |
| | Date 10/19/2016 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Debtor 1 | | | | Martinez | Case number (if known) |
|-------------------------|-----------------------|--------------|--------------------|----------------------------|--|
| CR-528-275-24C-0805-275 | First Name | | Middle Name | Last Name | NARAWI NA 11/2 WAY 1880 1887 1 - MANGARA NA MANGARAN WAY 1 - WAY 1880 1880 1880 1880 1880 1880 1880 188 |
| | editors, or other par | ties. | bankruptcy, did y | ou give a financial stater | nent to anyone about your business? Include all financial institutions, |
| <u> </u> | Yes. Fill in the deta | als below. | | | |
| | | | | Date issued | |
| | Name | | t and the second | MM/DD/YYYY | _ |
| | Number Street | | | _ | |
| | | | | _ | |
| | City | State | Zip Code | | |
| Part 12: | Sign Below | | | | |
| | nkruptcy case can r | | s up to \$250,000, | or imprisonment for up t | perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signatur | re of Debtor | | - | Signature of Debtor 2 |
| | Date 10 | /19/2016 | | | Date 10/19/2016 |
| Did y | you attach additiona | l pages to \ | our Statement of | Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| | No Yes | | | | |
| Did y | you pay or agree to p | oay someon | e who is not an at | torney to help you fill ou | t bankruptcy forms? |
| IJ | No | | | | |
| Ĺ | Yes. Name of person | | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Martinez, Pablo ; | Case No | |
|---|-------------------|---|--|
| *************************************** | Debtor(s) | | |
| | | Chapter. Chapter13 | |
| | VERIFICAT | TION OF CREDITOR MATRIX | |
| knowled | | t the attached list of creditors is true and correct to the best of their | |
| Date: | 10/19/2016 | /s/ Martinez, Pablo 10 h of ME7 | |
| | | Martinez, Pablo Signature of Debtor | |
| | | | |
| | | /s/ | |
| | | Signature of Joint Debtor | |

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| Debte | or 1 Pablo | | Martinez | Case number (if known) | | |
|--|---|--|-------------------|------------------------|-------------|--|
| | First Name | Middle Name | Last Name | | | |
| 16. | Calculate the median family income that applies to you. Follow these steps: | | | | | |
| | 16a. Fill in the state in which you live. | | Illinois | | | |
| | 16b. Fill in the number of people in your household. | | 2 | | | |
| | 16c. Fill in the median family income for your state and size of | | | | \$63,820.00 | |
| | household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | | | |
| 17. | How do the lines compare? | | | | | |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | |
| | 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 11 U.S.C. § 1325(b)(3)</i> . Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | | | | | |
| Part : | 3: Calculate Your Com | mitment Period Under | 11 U.S.C. §1325(b |)(4) | | |
| 18. | Copy your total average mo | onthly income from line 11 | l. | | \$4,478.60 | |
| 19. | Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. | | | | | |
| | 19a. If the marital adjustment | t does not apply, fill in 0 on l | line 19a. | | -\$0.00 | |
| | 19b. Subtract line 19a from line 18. | | | | \$4,478.60 | |
| 20. Calculate your current monthly income for the year. Follow these steps: | | | | | | |
| | 20a. Copy line 19b. | | | | \$4,478.60 | |
| | Multiply by 12 (the num | ber of months in a year). | | | x 12 | |
| | 20b. The result is your current monthly income for the year for this part of the form. | | | | \$53,743.20 | |
| | 20c. Copy the median family income for your state and size of household from line 16c. | | | | \$63,820.00 | |
| 21. | low do the lines compare? | | | | | |
| | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | | | | | |
| | | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4. | | | | |
| Part 4: Sign Below | | | | | | |
| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. | | | | | | |
| Letter de la San | | | | | | |
| | * /s/ Pablo Martinez 1 (16/0 NOV FI) EC * | | | | | |
| | Signature of Debtor 1 | 1 (* | | Signature of Debtor 2 | | |
| | Date 10/19/2016 | | | Date | | |
| | MM/DD/YYYY | | | MM/DD/YYYY | | |
| If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly above. | | | | | 14 | |